Docket No.: 117215

APPLICATION FOR UNITED STATES PATENT **DECLARATION AND POWER OF ATTORNEY**

AW02-0073

As a below named inventor, I hereby declare that:

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	My residence, post office address	and citizenship are as state	ed below next to my name;	mar	
	I verily believe I am the original,	Com and sale incomes (if	ants one name is listed he	low) or an original, fit	st and joint inventor
	I verily believe I am the original,	HILZI SIDG SOIR HARTIOL (II	Olity Offe Harre is match be	10W) C1 LL1 C11ELLL1, 12	
1	inventors are named below) of the	e subject matter which is	claimed and for which a	patent is sought on th	e invention entitied:
(if pluma	Myentors are hared below, of a	C SUDJOOK HEALT WELLER TO	THE PROPERTY AND ADDRESS AND A	باد منا المصناعات السعاد المسا	- merification:
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led: VIBRATION Check one attached hereto. filed on _____ as Application No. ____ and amended on ____ (if applicable). b. I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above. I acknowledge the duty to disclose to the Office all information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations, §1.56. Under Title 35, U.S. Code §119, the priority benefits of the following foreign application(s) and/or United States provisional application(s) filed by me or my legal representatives or assigns within one year prior to this application are hereby claimed: Japanese Patent Application No. 2002-380172 filed December 27, 2002. The following application(s) for patent or inventor's certificate on this invention were filed in countries foreign to the United States of America either (a) more than one year prior to this application, or (b) before the filing date of the above-named foreign priority application(s) and/or United States provisional application(s): I hereby appoint the following as my attorneys of record with full power of substitution and revocation to prosecute this application and to transact all business in the Patent Office: James A. Oliff, Reg. No. 27,075; William P. Berridge, Reg. No. 30,024; Kirk M. Hudson, Reg. No. 27,562; Thomas J. Pardini, Reg. No. 30,411; Edward P. Walker, Reg. No. 31,450; Robert A. Miller, Reg. No. 32,771; Mario A. Costantino, Reg. No. 33,565; Stephen J. Roe, Reg. No. 34,463; Joel S. Armstrong, Reg. No. 36,430; Christopher W. Brown, Reg. No. 38,025; Richard E. Rice, Reg. No. 31,560; Paul Tsou, Reg. No. 37,956; and Eric D. Morehouse, Reg. No. 38,565. ALL CORRESPONDENCE IN CONNECTION WITH THIS APPLICATION SHOULD BE SENT TO OLIFF & BERRIDGE, PLC, P.O. BOX 19928, ALEXANDRIA, VIRGINIA 22320, TELEPHONE (703) 836-6400. I hereby declare that I have reviewed and understand the contents of this Declaration, and that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. Typewritten Full Name TAKENAKA Masayuki of First or Sole Inventor Middle Initial Family Name **Inventor's Signature: 2003 **Date of Signature: Day Year Month Janan Aichi-ken

Anjo-shi Residence: Country State or Province City Japan Citizenship: Post Office Address: c/o AISIN AW CO., LTD. (Insert complete mailing address, 10, Takane, Fujii-cho, Anjo-shi, Aichi-ken, 444-1192, Japan including country)

^{*}If Box (a.) is checked, this form may be executed only when attached to the specification (including claims).

^{**}Note to inventor. Please sign name exactly as it appears above and insert actual date of signing. IF THERE IS MORE THAN ONE INVENTOR USE PAGE 2 AND PLACE AN "X" HERE 🛛

PAGE 2 OF U.S.A. DECLARATION FORM (Discard this page in a sole inventor application)

] Typewritten Full Name of Second Joint Inventor (If any) _		Name	Townstalen	•	MURAKAMI
		or (if any)	Tomotaka Given Name	Middle Initial	Family Name
2	**Inventor's Sign	ature:	Tonotaka		murekens
3	**Date of Signan		November	14	2003
3	Date 01 2 18 11		Month	Day	Year
	Residence:	Ar	njo-shi	Aichi-ken	Japan
	Keineice.		City	State or Province	Country
	Citizenship:	Japan			
	1	Post Office Address: (Insert complete	c/o AISIN AW CO., LTD.		
		mailing address, including country)	10, Takane, Fujii-cho, Anjo-s	hi, Aichi-ken, 444-1192, Japan	
1	Typewritten Full	Name			
of 1	Third Joint Inventor	(if any)		Middle Initial	Family Name
•		•	Given Name	Middle Initial	raility Natic
2	**Inventor's Sign				
3	**Date of Signati			Day	Year
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	Residence:				
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		mailing address,			
		including country)			
1	Typewritten Full	Name			
of i	Fourth Joint Invento	r (if any)			The second of the second
•			Given Name	Middle Initial	Family Name
2	**Inventor's Sign				
3	**Date of Signat	ure:		Day	Year
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	Citizenship:				
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i	Typewritten Ful	l Name		•	•
af.	Fifth Joint Inventor	(if arry)			
-,	-		Given Name	Middle Initial	Family Name
2	**Inventor's Sign	nature:			
3	**Date of Signat	ure:			Vann
			Month	Day	Year
	Residence:				
	•		City	State or Province	Country
	Citizenship:				
		Post Office Address:			
		(Insert complete			
		mailing address,			
		including country)			

Note to Inventors: Please sign name exactly as it appears and insert the actual date of signing.

This form may be executed only when attached to the first page of the Declaration and Power of Attorney form of the application to which it pertains.